

Henry Brendzel

DAC 87 A

Complete if Known

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/703,857
Filing Date	11/1/2000
First Named Inventor	Sheryl Leigh Woodward
Examiner Name	J. Ustaris
Group/Art Unit	2611
Attorney Docket ID	Woodward 2000-0072

Total number of pages in this Submission: this page, plus

14

ENCLOSURES (check all that apply)

RECEIVED

SEP 28 2004

OFFICE OF PETITIONS

If Fee Form is **not** included, but a fee is due, the Commissioner is Authorized to charge Deposit Account No **500732** of **Henry T. Brendzel**, and consider that appropriate requests have been made.

☒ Fee Form ☒ Check included☒ Amendment/Response☐ After Final☐ Affidavit(s)/Declaration(s)☐ Extension of Time Request☐ Information Disclosure Statement☐ Certified Copy of Priority document(s)☐ Response to Missing Parts/
Incomplete Application☐ Response to Missing Parts
under 37 CFR 1.2 or 1.53☐ Declaration (no Missing Parts Notice)☐ Assignment Papers
(for an Application)☐ Drawing(s)☐ Licensing-related Papers☒ Petition to revive☐ To Convert a Provisional Application☒ Power of Attorney, Revocation or
Change of Correspondence Address☐ Express Abandonment☐ Terminal Disclaimer☐ To Convert to Statutory Invention
Registration☒ Postcard(s)☐ Small Entity Status☐ Request for a Refund☐ After Allowance Communication
to group☐ Appeal Communication to Board of
Appeals and Interferences☐ Appeal Communications to Group
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☐ Other

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name

Henry T. Brendzel

Signature

Date

9/15/04

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as service in an envelop addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA22313-1450 on this date:

Henry Brendzel

Name of Person Signing

Signature

Date

9/18/04

9/20/04

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The Commissioner is hereby authorized to charge indicated fees and other underpayments, and credit overpayments to:				
Deposit Account Number	500732	Deposit Account Name	Henry T. Brendzel	
ENTITY STATUS:		<input type="checkbox"/> Small Entity Status is hereby requested		

FEE CALCULATION							
1. FILING FEE		Fee Description					Fee Paid
2. CLAIMS		Claims remaining	Highest Paid	Extra	Rate	Amount	Fee Paid
Total No. of Claims		18	20	0	18		
Independent Claims		5	3	2	86	172	
Multiply Dependent Claims							
			SUBTOTAL (2) (\$)				172

FEE CALCULATION (cont.)		
	Fee Description	Fee Paid
	Petition to revive unintention	

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	Henry T. Brendzel			Reg. Number	26,844
Signature			Date	7/20/04	Deposit Account User ID